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THE PRINCIPLES AND PRACTICE OF OBSTETRICS.—A REVIEW.*

[Communicated for the Boston Medical and Surgical Journal.]

PROFESSOR BEDFORD is so honorably known to the medical world by his "CLINICAL LECTURES" that his contribution of an elaborate work upon the Principles and Practice of Obstetrics will not be unexpected, although, unlike its predecessor, it finds a well occupied field, of circumscribed limits, and without any large opportunities for theoretical or practical novelties. With so much, therefore, to discourage the labor which is indispensable to success in this highly cultivated department, it is evident that the industrious author of the "Clinical Lectures," and an eminent teacher of Obstetrics for twenty years, has not offered to the profession a work upon the latter subject of inferior excellence. We may be sure that a work which has been rendered into French, and illustrated by 200 additional pages of an alphabetical commentary, at the hands of a distinguished Frenchman, will not be the parent of any unworthy offspring.

Our author has explored the whole of his ground in a thorough, luminous, and systematic manner, and perhaps more than any other has adapted his work to the requirements of medical pupils. Consisting of a series of Lectures delivered before medical classes, it naturally commends itself to the sympathies of medical students, and as a text-book for medical schools; and this especially on account of its method, its completeness in respect to facts and the latest improvements, and its compact yet familiar and lucid style. We do not intend to institute any critical comparison of this with other able works upon obstetric science, but simply to express an opinion that it is inferior to no other in all that constitutes excellence, while as a text-book we are inclined to think that it has a general superiority over all others. We know of no other work that abounds with greater evidences of research, or which is more exact, or more philosophical, in the department to which it is

* The Principles and Practice of Obstetrics. By GUNNING S. BEDFORD, A.M., M.D., Professor of Obstetrics, the Diseases of Women and Children, and Clinical Obstetrics, in the University of New York; Author of "Clinical Lectures on the Diseases of Women and Children." Illustrated by four Colored Lithographic Plates and Ninety-nine Wood Engravings. Pp. 731. New York, S. S. & Wm. Wood, 389 Broadway. 1861.

limited; and it is quite exempt from diffuseness and extraneous matter, unless here and there an allusion to provoke an agreeable sentiment, or a little pathos to equally invest the pelvic bones, the forceps and the crotchet with a romantic interest. An example of the comprehensive brevity of style in the statement of general propositions will show our author's aptitude in this respect, while his details are not less addressed to the facts and their logical application. Thus, at page 110 we find the following upon—

"Reproduction—Meaning of the Term."—Reproduction, in its strict physiological meaning, implies the development of a being, so that it may be capable of an external or independent existence; hence, it consists of a series of processes, which, when completed, constitute the entire reproductive act. The first of these processes, in the human species, is the contact of the two sexes, known as copulation. The second process is fecundation, which consists in the exercise of a vitalizing influence, through the male, on the germ furnished by the female. This act of vitalization, or imparting life, gives rise to another process, conception. In strict physiological truth, it may be said that the male fecundates, and the female conceives. Then follows gestation, during which the embryo grows and becomes developed; and when its development has been sufficiently accomplished, labor occurs, the object of which is to expel it from the uterus. As soon as this is effected, the entire relations of the new being are changed. It breathes, and, therefore, has a circulation of its own. It is no longer dependent upon its parent for the elaboration of its blood; its lungs, which, before birth, were without function, commence at once their round of duty; the first gasp of the infant may be considered its declaration of independence."

We shall now endeavor to present our readers with a general analysis of the work, which cannot fail of being far more acceptable than our speculations upon its merits; and we proceed, therefore, to the important matter of a table of contents, which, it may be said, besides a copious index, has been liberally supplied by the author.

Professor Bedford lays out the foundation of his work in his first lecture by a description of the bones of the pelvis, about which the whole practical part is interested; and, although "the dry bones of the skeleton" is proverbial with students of anatomy, our author has contrived to impart to those of the pelvis a peculiar interest, while he has aided the learner here, as throughout the work, with well-executed engravings.

The second lecture is devoted to the divisions, articulations, arcs, and uses of the pelvis. A careful attention is given to all of these important topics, and some practical errors which have hitherto obtained are corrected. What is most difficult to the student, such as the straits and their planes and axes, is well illustrated.

The third lecture discusses the foetal head in its divisions and presentations, and the fourth exhibits the mechanical conditions of labor in vertex presentations. We almost regret, for the sake of our critical acumen, that we have not been able to detect any flaws in this trial-ground of the author's ability. Indeed, he is himself, hereabouts, a successful commentator upon the speculative opinions of others, a good example of which occurs in the third lecture where he is reciting the various hypotheses as to the great

proportional frequency of head presentations—from Hippocrates and Galen, who supposed that the head was uppermost till the seventh month of gestation, when “the foetus made a somerset” and the heels went up, down to Paul Dubois of our own day, who published, in 1832, an essay referring the phenomenon to “an instinctive or physical influence exercised by the foetus,” but all of which are considered as chaff before the questionable theory of reflex nervous actions, “ably advocated by Prof. Simpson.” Our author, more wisely than the rest, surmises that, “in lieu of any one of these causes being *per se* sufficient to explain the position of the foetus in the womb, the fact is due to a combination of circumstances not yet, perhaps, properly comprehended.”

The foregoing discussion reminds us of our author’s collation of hypotheses as to “the determining cause of labor or that peculiar influence which first excites the muscular fibres of the uterus to contraction,” and his own ingenious interpretation of that phenomenon, which occurs in his twenty-second lecture. After a critical examination of the principal doctrines, especially the ovarian hypothesis of Dr. Tyler Smith, and the orificial irritation of Dr. John Power, both of which are founded upon the laws of reflex nervous action, and having successfully refuted the whole, our author delivers his own rationale in considerable detail. The subject involves an inquiry of great physiological interest; but our limits will admit only of a few comments upon our author’s doctrine, which is predicated of the principle that—“there seems to be a necessary connection between the first spontaneous movement in the muscular walls of the uterus and a matured development of the muscular structure of the organ itself.” This is beyond contradiction or doubt; but is it anything more than the assertion of an evident fact? Does it expound the great and wonderful problem—the *how* or the *why* the “spontaneous movement” grows out of the “matured development of the muscular structure”? Are there any analogies, any physiological law, to sustain the conclusion; for our author supposes that there is an inherent ability in the fully developed uterine muscular structure to institute the parturient process independently of any other exciting cause, and, above all, that “it has no connection whatever with a reflex or nervous force”—not the least. Here our author launches into the maelstrom of reflex nervous actions, about which physiology and medicine are most profoundly interested, but where all but skilful navigators are liable to shipwreck. In the matter before us we think that our author was upon exactly the right ground, but that, instead of following his favorite “analogies of Nature,” he errs in assuming, upon the authority of others, that peristaltic motion of the intestine is independent of the nervous influence, for the sake of applying it analogically to uterine contractions. But it has not been at all shown that natural peristaltic motion is not excited by reflected nervous influence. Experiments have only

shown that other causes are capable of exciting those movements, such as atmospheric air, mechanical injuries, electricity, &c., just as in the case of the extirpated heart. In the natural condition of the intestine there must be equally an exciting cause of the peristaltic movements, as much so as in the case of the heart, or of the respiratory muscles, or of the iris, or of the sphincters, and, as in the latter cases, what else than the nervous influence in that of the intestine? And is not this confirmed by the effects of cathartics and suppositories? What else can there be than an augmented nervous influence excited by the cathartic in the nervous centres and thence reflected upon the intestinal muscular tissue that increases its natural movements? And if this be so, as it demonstrably is, what does our author's "analogies of Nature" (in which he has "an abiding faith," p. 313) say as to the exciting cause of the natural movements? Why are the natural movements suspended in jaundice, or when food is long withheld, unless bile and the ingesta be remote causes of those movements, and how else can they reach the intestinal muscular tissue than through reflected action from the nervous centres? How else can the stimulus of the blood affect the muscular substance of the heart than through the circuitous route of the nervous system?

Physiologists are also greatly in error in supposing that the nervous influence ceases to operate immediately after apparent death, and therefore in the inference that the expulsive movements of the uterus after apparent death are not excited by the stimulus of the nervous influence. The expulsive efforts are ample proof that there is still remaining life; and various recorded facts substantiate the continued action of the nervous system as long as muscular irritability and contractility remain. It is true, it suits the special objects of some physiologists to assume that life becomes extinct in the nerves almost as soon as the heart ceases to pulsate; but we have seen (and others also), and formerly recorded a case in which the same contractions of the voluntary muscles continued for an hour and a half after apparent death, from malignant cholera, as had existed before the subject ceased to breathe. Numerous facts relative to organic life concur in showing the same persistence of action in the nervous system, under special circumstances.

As to the experiment of destroying the lower portion of the spinal cord and the accomplishment of labor notwithstanding, it has been here completely neglected that the uterus is still connected with the essential parts of the nervous system by contributions from the sympathetic nerve and other parts of the cerebro-spinal system. Moreover, it is now well ascertained that the ganglia of the sympathetic nerve, even certain parts of that nerve, the auditory even, may become centres for reflected nervous action, especially when preternatural influences are in operation, as when, for example, vesicants subdue deep-seated inflammations. And so

when the intestines are extirpated and roll about upon the table, ganglia and plexuses of the sympathetic nerve may, under the preternatural exciting causes, become the media of reflected nervous influences. In the case of the parturient efforts after the destruction of the lower portion of the spinal cord, that very injury calls into operation other resources in the nervous system with which the uterus is indirectly supplied. We admire our author's reasoning from the "analogies of Nature" where he is so successfully employed in refuting the hypotheses of others who have endeavored to expound the philosophy of incipient labor, and he allows, in his twenty-second lecture, that "the spinal cord, the essential nervous centre, plays an important part in the general movement, resulting in the delivery of the foetus and its annexæ," and that "it is perfectly correct to say, that, as a general rule, labor is in part accomplished through reflex nervous action." But relying upon that poor experiment of destroying the inferior portion of the spinal cord, he tells us that—"the inherent action of the uterus will, under certain circumstances, suffice to accomplish the birth of the child, showing incontestably that childbirth is not essentially dependent upon nervous agency." The supposed "inherent action" may be sufficient, *per se*, for a single contractile movement, but an exciting cause is necessary to a long series of alternate contractions and relaxations. Our author, however, readily concedes that Nature has no unnecessary multiplication of fundamental causes, and as he is obliged to admit, "that, as a general rule, labor is in part accomplished through reflex nervous action," he had only to follow out that "general rule" after stating his proposition that there is "a necessary connection between the first spontaneous movement in the muscular walls of the uterus and a matured development of the muscular structure of the organ itself," and have applied the rule of analogy as it respects the admitted agency of the nervous power in the ulterior uterine contractions to the first in the coincident series, and he would have fully expounded a problem which not only lies in the depths of physiology but is elementary in many natural and pathological processes. That "matured development" becomes the exciting cause of reflex nervous actions, just as the want of atmospheric air in the lungs is the remote cause of the reflected nervous influence that determines the respiratory movements—excepting in the case of the uterus the compounded sensitive and excito-motory nerves, which are the channels of the reflected stimulus, appertain exclusively to the muscular tissue of the organ. This, however, has its exact analogy in the reflex nervous actions upon which, as we have shown on another occasion, roosting and sleeping in an erect posture depend, as also the spasms which are sometimes excited in irritable muscles of the lower extremities by a forcible act of the will. In the former case there is a natural adaptation of the muscles to that exercise of the will, which, by placing them in a rigid state,

establishes a reflex nervous action that maintains them in permanent contraction, as in the case of the sphincter muscles. The same natural provision becomes developed in the gravid uterus to subserve the exigencies of parturition, and is allied to that irritable state of the voluntary muscles in which the will may institute spasmodic movements. As soon, however, as "the determining cause" has instituted the process of labor, the point of departure for the reflected stimulus of the nervous power becomes compounded, and the foetus participates as an exciting cause of the reflected nervous influence.

Our author's fourth lecture, as will have been seen from what we have said of its subject, is one of the most important. It presents a "description of the mechanism by which the child, in the several positions of the vertex, is enabled, with safety to itself and parent, to pass into the world," and all that is relative to the parturient process in the several positions is related with the skill of an accurate observer and sound thinker. And here, too, as throughout the work, the author inculcates a large dependence upon physiological laws (better known as Nature), and deprecates the officiousness of Art. He displays a tender and philosophical humanity as well towards the intra-uterine child as the mother, and is therefore conservative of the foetus as far as possible—perhaps too far. Nevertheless, he says—"if Nature be really so full of wisdom, and so bountiful in her provisions, it may be urged that she requires no assistance from science, being thoroughly adequate to the efficient discharge of her duties." "But it will sometimes happen that she is contravened in her arrangements by circumstances that she cannot control, and therefore her relief must be found in the judicious interposition of science." "To be her substitute, in truth and effect, you must have been her disciple, and learned from her teachings the series of processes which, in the aggregate, make up what is known as the mechanism of labor." He supposes a lingering case, occasioned by an impaction of the head, in a well-formed pelvis, where "Nature has been vainly struggling to accomplish the movements of *flexion*." Shall the perforator and crotchet come to the rescue of the mother, as has been too often the case? Certainly not. The enlightened practitioner would, by simple manipulation, "assist Nature in producing the movement of *flexion*," and thus save both mother and child. "Suppose, however, after the movement of flexion, the strength of the mother is so much exhausted as to positively indicate the necessity of immediate delivery." The proper means will be the forceps. "But," says our author, "remember this essential fact, in the employment of the forceps, the head being in the diagonal position—after locking the instrument, and before making any extractive force, the first thing to be done is to turn the forceps gently from left to right, for the purpose of producing the movement of *rotation*—by the neglect of which many a child

has been sacrificed, and the mother cruelly lacerated." Our limits compel us to hasten on with our analysis.

The fifth lecture treats of the deformities of the pelvis. The author, however, does not "think it necessary to enter upon a minute description of the various pelvic deformities enumerated by authors, but prefers stating some general facts that will lead to the best practical lessons for the lying-in chamber."

The sixth lecture describes the organs of generation, and in that circumstantial manner which not only satisfies the immediate objects of obstetrics, but subserves all the physiological conditions and the anatomical relations to morbid states.

The seventh lecture is appropriated to menstruation, and the eighth to re-production. These subjects are treated practically and philosophically, and the latest researches are amply stated.

In the ninth, tenth, eleventh, and twelfth lectures the author exhausts the subject of pregnancy. He maintains that gestation is not a pathological condition, and, after very full and satisfactory arguments, uses the following language:—

"So far, then, from regarding gestation as a pathological state, we maintain that, as a general principle, it is entitled to be denominated *a period of increased health*. I am speaking now of the general rule, and not of the exceptions, to which we shall hereafter have occasion to direct your attention. Indeed, some of the very best observers have declared—and the fact is well established by statistical data—that the probability of prolonged life is increased as soon as pregnancy occurs. Let us now take the converse of this proposition, and you will see, in its results, an additional proof that gestation is not in truth a diseased condition; look, for example, at those females who, either from choice or necessity, lead a life of celibacy, and see how much greater is the record of their mortality. Marriage and pregnancy, therefore—however true religion and an earnest love for God may fill the cloister by devoted and self-sacrificing ladies—should be regarded as among the covenants of nature, and the demonstration is found in the fact of the better health and greater longevity of those who keep these covenants inviolate."

Lectures thirteen, fourteen, fifteen and sixteen are devoted, respectively, to the rules for ascertaining the existence of pregnancy, to extra-uterine pregnancy, to the occasional derangements accompanying pregnancy, and to displacements of the uterus in pregnancy.

In lectures seventeen and eighteen are considered the foetus and placenta, and the nutrition and development of the foetus.

The nineteenth lecture treats of abortion, physiologically as well as practically, and considers opinions and experiments with critical ability. It is worthy of particular remark, as related to our discussion of the determining cause of labor, that our author finds that reflex nervous actions often *institute* abortion. Indeed, he regards it "as one of the causes more or less constantly at work in the production of abortion." Can there be any other cause than the nervous influence, operating as a stimulus to the organic properties of the muscular substance of the uterus, which are the efficient causes of the parturient movements, but which require as much an exciting cause as the muscles in respiration

or in voluntary motion, and that cause is common to the whole. It is brought into operation by a great variety of more remote causes, both mental and physical.

Lecture twenty, upon molar pregnancy, has its scientific disquisition, and embraces many important facts and curious details relative to *true* moles and *false* moles, "from the days of Hippocrates."

Lecture twenty-one discusses and classifies the varieties of labor, considers the inception and duration of pregnancy, and the opinions of distinguished observers.

Lectures twenty-two to twenty-six comprehend the whole subject of labor, the general topics being, respectively, the determining cause, the expulsive efforts, natural labor, duties of the accoucheur in natural labor, and management of the placenta; all of which are treated with a tact and judgment that cannot fail of advancing this important interest of humanity.

Lecture twenty-seven is employed about post-partum hæmorrhage, in which the author appears to have neglected nothing of importance, and has availed himself of his ready resource to impress a recollection of what is to be done in the emergencies of this critical juncture.

In lecture twenty-eight the treatment of the puerperal woman, and of the new-born infant, is considered in a circumstantial manner that is especially valuable to the inexperienced, and which rarely finds its way into obstetrical works.

The whole of lecture twenty-nine is given to multiple pregnancy and superfœtation; and the whole of lecture thirty to inversion of the uterus, and yet so great is the variety and interest of their relative subjects that we see nothing to abridge and nothing to improve.

In lecture thirty-one the important subjects of preternatural labor, placenta prævia, and unavoidable hæmorrhage are discussed with unsailing ability.

Lecture thirty-two is appropriated to eccentric puerperal convulsions, and lecture thirty-three to centric convulsions. Although these subjects are inviting to theoretical ingenuity, our author is mostly practical, though we apprehend that the considerable space which is allotted to uræmia, &c., had better have been occupied with the realities of nature. In the thirty-third lecture we encounter the terms "urea," "uræmia," "toxæmia," "kieseine," "uræmic intoxication," "albuminuria," "blood-poisoning" and "eliminators," a vocabulary which was probably considered necessary to propitiate the humoralists of the day, and as "a posting up of the latest improvements." Nevertheless, such are the profound displays of nervous force in the voluntary muscles that all but the last of the foregoing terms are rendered expressive of the relations of cause and effect of the admitted agency of the nervous power, while, very consistently, the treatment of this appalling malady is made to depend upon the "eliminators." It is but fair,

however, to say that our author, although tarrying here a good while, is very shy if not very sick of his company.

Lectures thirty-four to thirty-seven are devoted to manual labor, the various presentations, divisions and rules of version, and their relative topics. They are very complete studies, succinct, lucid, and attractive.

Lectures thirty-eight to forty-two cover the whole ground of instrumental delivery, and are marked with our author's characteristic ability. They form an important part of his work and must be studied to be appreciated, certainly to be rendered of that practical value to which they may be applied. We are glad to see him protesting against an indiscriminate use of the forceps, which has occasioned "numerous appalling examples of injury and death" where nature would have accomplished a safe delivery. Had our room admitted, we should have been glad to have quoted our author's demonstration in behalf of "conservative midwifery."

Lecture forty-three treats of premature artificial delivery, which is extensively and well examined. The following paragraph is too suggestive upon a vital question to be omitted:—

"It now remains for us to examine the important question—is abortion, under any circumstances, a justifiable alternative? This question has been much controverted, and it is one on which the sentiment of the profession is not concurrent. In order that the special points in the discussion may be fully appreciated, they may be advantageously presented under the two following heads: 1st. When the maternal passages are so contracted—no matter from what cause—as to render it certain that a *viable* fetus cannot be made to pass. 2d. When the maternal passages are normal, but the mother's life is involved in alarming peril by the occurrence of some serious complication, such as convulsions, hemorrhage, or excessive vomiting. It is manifest that the moral part of the question turns upon the simple interrogatory—is the embryo in the earlier states of its existence a living being? All correct physiology demonstrates that it becomes in truth, at the very moment of fecundation, imbued with vitality—the contact of the sperm cell and germ cell constituting the *act of the breathing of life*."

Lectures forty-four, forty-five and forty-six treat, respectively, of puerperal fever, puerperal mania, and anaesthetics. As to the treatment of puerperal fever our author belongs to the school of the symptomatists. "In inflammatory puerperal fever the prompt abstraction of blood is called for"; "in one word, *make your patient faint*"—repeated, he continues, in three or four hours if necessary. Perhaps leeches, also, cathartics, &c., follow. "In the adynamic form of the disease, characterized at the very commencement by a sinking of the vital force, depletion is not to be attempted. Stimulants, nutriment, and pure air are unequivocally indicated." So said Gordon, Denman, Hey (all eminent men); but their sad experience (and our author admits as much of the plan) convinced them of their error, and shifting from stimulants to copious blood-letting, they rarely lost a patient. For our part, we fully concur in the ultimate avowal of Mr. Hey, that—

"There is a vast difference in the puerperal fever at different times, and in different situations and circumstances. In some

cases it appears like a phlegmonous inflammation; in others it destroys with more rapidity and certainty than the plague. But the means of cure are *precisely the same* in both; but in the worst forms the measure of bloodletting is *greater and less limited*, and the period within which it must be employed is far more circumscribed." These are the cases in which he had inculcated the disastrous stimulating treatment.

Our kind-hearted author has a doubtful word for the *opium* and the *veratrum viride* treatment, and pays "a left-handed compliment" to Dr. Graves, of Dublin, in intimating that he may have been the accidental author of the narcotizing school.

Before taking leave of our author we would again commend his work for its unsurpassed ability in all that appertains to scientific and practical midwifery—the practical aspect being its prominent characteristic. It is a national work, and should therefore, in having no superior competitor, become the text-book in the Medical Colleges of the United States. It is time that a greater interest should be manifested for our own medical literature—not a whit behind that of Great Britain, which has hitherto contrived to over-ride our own. We have permitted ourselves to be whipped into this ignominious condition—allowing all that may be due to the jealousies of domestic competition; and that there is no relaxation of the systematic discipline from abroad, or of our submission to it, we are assured on turning to the Review of Professor Gross's late "American Medical Biography," in the July number of an American edition of the *British and Foreign Medico-Chirurgical Review*, in which, after a profusion of ridicule of what it denominates the "biographers and the biographees," and a characteristic John Bull hit at "the Union now in process of disruption," it is said, as a final and summary conclusion, that, "We shall be sorry if it is ever our lot again to meet with an *American Medical Biography*." This very Journal, too, which never spared what is able in the medical literature of these United States (but only what is ephemeral), notwithstanding its re-publication and support for near half a century by those whom it maligns, now, taking council of the past and encouraged by the hope that "the Union is in process of disruption," would not only extinguish our "*dui immortales*" and all their contributions to a Nation's best wealth, but *the very Nation itself*. But able and influential as we concede the Journal to be, few, indeed, as much so (which is our palliation, not justification), "we still live," and we will, moreover, hazard the prediction that PAUL GENTIL, M.D.P., of Paris, will find a greater interest in employing his accomplished pen at a *translation* of the work before us than when engaged in like manner with our author's "*DISEASES OF WOMEN AND CHILDREN*."

M. PAINE.

New York, October, 1861.

PINEL, BROUSSAIS AND LOUIS.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—Without any pretence of originality, I have compiled the enclosed from some foreign paragraphs. E. S.

Pinel is represented to have been a stirring and emphatic personage, for a time holding the sceptre of medicine in France. He occupied a chair at the Academy, and at the faculty clinique; books, journals and lecturers drew their inspiration from his doctrines. In his philosophy the problem of medicine took this formula:—given a disease; to determine its place in a nosographic category. Thus were maladies numbered, labelled and systematically classed as objects of natural history. If some patient, blind to the beauties of science, insisted on being healed, he was silenced by the exhibition of a perfect nosology.

M. Bouillaud allots to medical doctrines the longevity of roses. The Pinelists prevailed fifteen years, when *l'Examen* of Broussais appeared. The Pinelists burned their nosographies, and Pinel, *hors du combat*, soon died. The historian says their books left not even a pinch of ashes. Broussais sounded a flourish of trumpets, ploughed and harrowed the field of medicine, then sowed there his new grain.

His doctrine held that there was no specificity in diseases, their etiology or treatment. "Every malady," said he, "is a signal of distress thrown out by a suffering organ; what one, we must ascertain. There are but two diseases, inflammation and sub-inflammation. The clinical problem is, where shall we place the leeches, and how many." And matters are still further simplified; gastritis constituted the immense majority of maladies, and if you applied the leeches to the epigastrium, the chances were a thousand to one in your favor. All the acute diseases, fevers, exanthems—all the chronic diseases, cutaneous—gout, gravel and neuroses, were gastritis or gastro-enteritis; and what but leeches and diet could be necessary? A patient complained to Broussais that his regimen was killing him, that he was dying of hunger. "Well," said he, "I will satisfy you, *bête carnassière*; you shall have a spoonful of broth in a glass of water." As Talleyrand used to say, "this is more than true, it is probable."

Then came M. Louis, armed with several thousand brute facts, which he hurls at Broussais. Louis, says the French editor, would be a man of genius if, in the language of Buffon, genius were only patience. The bloody dynasty of Broussais falls, and Louis proclaims that truth lies in things and not ideas; the senses only are reliable, mind is delusive. To observe, is to take notice how many times the patient has turned in bed, how often he spat, sneezed and coughed; then average the results. As to therapeutics, Louis ordains the remedy nearest at hand—quinine, opium,

warm or cold water, *ad libitum*—or nothing at all. Then make up the mortuary statistics and decide on treatment.

The Frenchman speaks of the “organopathy, the pleasantry and the cacophony” of M. Pierry. If life is the result of organization, and maladies are but the lesion of organs, Pierry is right. Organopathy is the last new word in medicine, and the terminology of M. Pierry is logical, if not euphonious.

In 1837, Risueno d’Amador spoke as follows from the tribune of the Academy, upon the question of statistics applied to medicine:—

“Your school has devised a new method, it counts facts and pretends to appreciate their value by their number; it adds, divides and subtracts, and with candid simplicity believes it is perfecting the methods of art. The foundation of your method is probability; now what else is probability but the theory of chance? To invoke probability in this sense is to renounce all certainty in medicine, all rules of induction by reasoning from the facts to science. It is substituting for experience, observation and reason, the mechanical and inflexible operation of figures. This numerical method destroys true art and true observation by substituting for the action of the mind and the genius of the practitioner a blind mechanical routine. If generally adopted, it must be because it is accessible to minds of the meanest grade; because it flatters the humblest; and this is its sole title to the admiration of the multitude. Your medicine is no longer an art, but a lottery; renouncing to know how and why it acts; abandoning itself to chance on the faith of an illusory arithmetic. It is skepticism embracing empiricism.”

An anecdote is told of a physician, who, being asked if he were of the school of Broussais, or Brown, replied that he was a doctor himself.

October, 1861.

Bibliographical Notices.

A Manual of Etherization, containing directions for the employment of Ether, Chloroform and other Anæsthetic Agents, by Inhalation, in Surgical Operations; with Instructions for the Preparation of Ether and Chloroform, and for testing them for Impurities; comprising, also, a brief History of the Discovery of Anæsthesia. By CHARLES T. JACKSON, M.D., F.G.S.F., Chevalier de la Legion d’Honneur; Cavaliere dell’Ordine dei S. S. Maurizio e Lazzaro; Ritter des Rothen Adler; Knight of the Turkish Order of the Medjidieh; Member of numerous Scientific and Medical Societies in Europe and America. Boston: J. B. Mansfield. 12mo. Pp. 134.

This is a very timely book, and written by the right man; a rare instance of what we want so much just now in so many different directions—the right man in the right place. No one surely could feel so jealous for the good success of ether as an anæsthetic, as he who first pointed out to us its invaluable properties in this capacity, and therefore no one would be more careful to furnish us with a safe and comprehensive guide for its use. This, we think, the author has done, and done thoroughly in the present treatise; but he has done much more than this. He has taken up the subject and exhibited it in most points of view in which it might interest either the medical man or

the ordinary unprofessional reader; and in so doing he has made suggestions which even few of the former, conversant as they think themselves to be with the agent, would not profit by.

The first chapter is devoted to the exhausting effects of pain upon the system—the clear recognition of these effects by the ancients, and the naturally consequent efforts of medical men from the earliest days to discover some means of neutralizing them. This includes the earliest efforts to attain anaesthesia. Those made by Dr. Jackson himself are detailed in the next chapter, where a history is given of the origin of the ether discovery. This is so familiar to most of our readers as to make it unnecessary for us to even rehearse its prominent points. It suffices to say that the narrative presents each step towards the great end, as taken in a clear, rational and scientific light, each leading to the next in logical order, until the discovery, perfect and complete in all its parts, bearings and relations, is arrived at.

Chapter III., though brief, is important in giving the process for the manufacture of ether. Chloroform is treated of in the next—its mode of preparation, and test for it detailed. A review is also taken of various other anaesthetics, including the last, Kerosolene.

The fifth chapter is devoted to the introduction of etherization into surgical practice. This, of course, embraces the points that have been disputed by Morton, as to his having a share in the discovery—a dispute too recent, and too well known in all its important facts, to require us to rehearse it here. For our own part, we willingly accept the award of the Monthyon prize, as indicating the relation of the two men in the matter, “it being made to Morton for having introduced this method into surgical practice, in accordance with the directions of M. Jackson.” In quoting this literal translation of the French, we cannot but allude to the untruthfulness of the “New American Encyclopedia,” which, in a notice of Morton, quotes the above, but leaves out all after the word “practice.” A publication that would descend to such a dishonesty as this in a matter of fact, can be little trusted where the judgment or feelings are concerned.

The directions as to the administration of ether are very important, the more so just now, as the article must often be used when proper medical men are not at hand to direct. Inhalers and all such mechanical contrivances are discarded, and the sponge and towel preferred. The suggestions for the use of ether for various purposes, such as the exploration of wounds—to detect “malingering” in soldiers, sailors or others—in insanity, &c. &c. are interesting, and did our space allow we should make some quotations.

The last chapters give very much in a small space, discussing the relative merits of chloroform and ether and of a mixture of the two, with various tables of cases, and general considerations. The physiological effects of ether are treated of at length, and the interesting experiments of Flourens, Velpeau, Gerdy, and many others detailed. This final chapter would admit of much enlargement, and we much wish the author would make it the subject of a separate paper for professional men. There is probably no one who could illustrate the chemico-toxical effects of the various anaesthetics upon the system, better than himself, and it is a subject that, as much as we use these agents, we know comparatively little about.

On the whole, after perusing this work, we feel that it has been interesting, and the general reader will find it more so, as the facts to

him will be newer, and they are told with an animated conciseness. It gives, also, very many facts in connection with the use of ether that ought to be more familiarly known, both to physicians and to the many. In this way we do not doubt it will prove very serviceable. But, as a medical man, we must say we wish there was more of it, and that the technicalities of the subject had been entered upon more fully. This, of course, would have perverted the book from one of the chief intents of the author. We may hope, however, that the suggestion above made will be adopted, and that we shall have something from his pen treating more intimately and rigidly of some of the most important effects of anaesthetic agents on the animal economy.

W. E. C.

Army Medical Intelligence.

[From our Special Correspondent.]

WASHINGTON, D. C., October 30, 1861.

MESSRS. EDITORS.—My last communication gave you an account of a gun-shot wound of the rectum. Since writing you, nothing of particular importance has transpired in the case. Oct. 29th, the patient made a sudden movement forward, causing an escape of considerable blood and pus from the femoral wound, without, however, retarding the progress of recovery. He sits up nearly all day, has a good appetite, and is gaining ground slowly but surely.

The second case in my series is a gun-shot wound of the arm and leg, producing most frightful laceration, and showing an almost miraculous escape. Patient, W. S., 1st N. Y. Reg't, Co. B., aged 25; intemperate habits; admitted into Hospital Sept. 24th, 1861. Sept. 21st, was quarrelling with a comrade, and while stooping down to pick up a stone, with his left arm in line with his right leg, he was shot with a Minié ball, which passed through the arm, destroying the skin for seven inches, beginning an inch and a half above the external condyle of the humerus, ploughing through the biceps muscle, and destroying the skin to the same extent on the opposite side to within an inch of the internal condyle. The radial artery pulsated distinctly, and consequently inference was drawn that the brachial artery was intact. Apparently, no nerves were injured. The wound presented a ragged appearance, was covered with a dirty gray slough, and innumerable maggots had already established their home in it. From the arm the same ball passed through the upper part of the popliteal space and the internal hamstring muscles, revealing something looking like the tendon of the great adductor muscle, which was totally destroyed. The muscles all protruded in a ragged mass, and on introduction of the probe the patient felt acute pain. From this, and from inability to evert the foot, injury of the peroneal nerve was suspected. The point of exit was less ragged than that of entrance. The posterior tibial artery was felt pulsating distinctly. From this wound the tumefaction was intense, extending to the lower third of the calf of the leg. The gray dirty slough and the maggots were here also. Both wounds were very offensive. Tongue very dry on edges, but moist on centre and tip. Pulse 92, and strong. Patient irritable, and suffering greatly. The wounds were both cleansed with

dilute Labaraque's solution, and flax-seed and charcoal poultices. Half a grain of morphia was given at night.

Sept. 25th.—Maggots still seen in wound of leg.

26th.—Sloughs had in part come away, and no maggots were seen. An injection was then ordered for both wounds, which, not only in this case, but in all the cases requiring a stimulation and at the same time a disinfecting injection, has proved most advantageous. Let me give it for the benefit of your readers. R. Creasote, 3*l.*; tannin, gr. xx.; aquæ camph., gtt. xv.; spts. lavand. co., 3*l.* M. Use a teaspoonful in a cup of cold water. In this case its effect was most brilliant.

28th.—Wounds look clean and healthy. Smith's anterior splint was found to be applicable, and was placed on the leg and attached to the ceiling.

Oct. 21st.—Poultice removed from leg and arm, and adhesive straps applied. Patient's leg straight. Flexion ordered daily, as well of arm as of leg.

24th.—An abscess has formed in the leg, which was opened, and an immense quantity of blood and pus escaped. Arm nearly healed. Able to raise his hand to his mouth. Leg still suppurating considerably, but there is complete flexion of both leg and arm.

The results, thus far, in both the cases I have given you, are most gratifying. The first, though a much more dangerous, is hardly a more interesting one than the last, and certainly does not present a better subject for interesting study.

H.

THE following is an extract from a letter of the Assistant Surgeon of the 19th Massachusetts regiment:—

CAMP BENTON, POOLESVILLE, Oct. 25th, 1861.

To the Surgeon General.

DEAR SIR,—Thus far, we have been very fortunate in our regiment; have had no serious disease, excepting a few cases of typhoid, which here has seemed to assume a malignant type—the patients coming into the hospital with a livid countenance and delirious. We have lost but one man from this or any disease, and he died five days after entering the hospital. We have, by this morning's report, 16 in the hospital, two of whom belong to the Sharpshooters. This number seems to us rather small when we take into consideration the position of our camp, which is low and on a clayey soil, with a very poor supply of water. Besides, for the past three weeks all of the regiment, excepting four companies, have been on constant picket duty between the river and the canal, all the time exposed to the fall storms, which have occurred here with some severity.

The 20th Mass., in our brigade, fought bravely in the late action at Ball's Bluff, although it was like fighting against a rock; they were badly cut up, reporting yesterday for duty about 450 men and 300 guns. The 15th, also, did what men could, but it was of no use.

Yours truly,

J. N. WILLARD.

PIROGOFF'S OPERATION.—The Medical Director of the U. S. Army desires that exsection of the shoulder and elbow-joints should be resorted to in preference to amputation, in all cases offering a reasonable hope of success, and that Pirogoff's operation at the ankle should be preferred to Chopart's, or to amputation above the ankle, in cases that might admit of a choice.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON: THURSDAY, NOVEMBER 7, 1861.

The following communication is in allusion to a subject which those whom it immediately concerns would do well to consider. We do not feel called upon to add anything by way of comment to the excellent remarks of our correspondent, knowing well that what we might say would probably aid little in restoring to their normal condition the blunted moral sensibilities of those who thus openly violate laws they are pledged to observe. We may, however, be allowed to indulge the hope, faint thought it be, that the sowing of a good seed, even in our poor soil, may bear fruit; and should this be the means of turning one sinner from the error of his ways, we shall feel that a service has been rendered. The manly course of Mr. Fergusson it would be well for some among us to imitate; otherwise, the Society, whose rules and regulations they are bound by their honor to obey, had better follow the example of a higher organization, and demand of them a renewal of their oath of allegiance.

MESSRS. EDITORS.—In two of your recent issues are paragraphs relating to the affair of Mr. Fergusson, of England, who, upon the complaint of his professional brethren, has at last promised "in future to decline any meeting or so-called consultation with homœopathic practitioners." The *Philadelphia Med. and Surg. Reporter* publishes a longer editorial on the same case, in which it criticizes with great severity such meetings, and says, "No respectable surgeon in the city of Philadelphia would give his services in a case where any variety of irregular was in attendance, excepting where the emergency was so great that time could not with safety to the patient be allowed for his discharge," and continues by expressing the belief that the same course is generally pursued among the profession in American cities.

How is it in Boston and vicinity amongst the leading members of the Mass. Medical Society? Do they persistently refuse to meet homœopathists, or hold consultation with them, except in extreme emergencies, or are they so kind-hearted, so unwilling to offer what might seem an affront to a brother physician (unfortunately a homœopathist), or to refuse a father or husband the benefit of their advice to his family physician, as to yield the point?

We know that it is impossible but that mistakes should occur, and that it is not customary for a physician, when called to see another's patient with him, to demand of the attending physician his diploma or certificates of good standing, and hence a man may consult with an irregular of any description through ignorance. But such mistakes can hardly occur if the latter be a person of any celebrity, one who advertises extensively, or one who has been advertised by being published year after year as the President of the Homeopathic Medical Society, or its Secretary, or at least holding some prominent office in it, and as a petitioner for a homœopathic dispensary and hospital.

What we mean to charge is this, that with such well-known homœopathists the most able physicians, accoucheurs and surgeons of Boston do advise, meet and consult. We cannot, of course, know how often they refuse such invitations, nor say but that *some* always do, if they know *absolutely* the character of the attending physician; it is beyond our power to know the facts excusing such a breach of the obligations imposed upon them by the Mass. Med. Society and American Med. Association; we can only declare that these obligations are not unfrequently broken. Cannot these gentlemen make theory and practice agree? Cannot such laws be rescinded or such practices dropped? Country doctors and provincial members are naturally anxious for "more light" on this subject. Will eminent Boston gentlemen give it us?

Yours,

RADICAL.

VISIT TO THE CAMP OF THE 23D REGIMENT.—We were very much gratified, on Saturday last, by a visit to the camp of the 23d regiment, Col. Kurtz, at Lynnfield. In point of position and condition, the hygienic aspect of the camp was everything that the most fastidious sanitarian could desire. Much credit is due to the military officers, as well as to the Surgeon, Dr. George Derby, and his assistant, Dr. Silas E. Stone, for this state of things. The grounds were entirely free from the slightest trace of anything offensive, and the most perfect neatness everywhere prevailed. The sinks for the men were beyond the reach of any of the senses to a person in camp, and a sentry on duty had orders to arrest any man who used any other place than the sinks for the purposes for which they were intended. A trench in a convenient spot received all the garbage from the cook-houses, which was covered in with earth at frequent intervals to prevent any contamination of the atmosphere. We were particularly interested in seeing the practical operation of the new method of making the tents comfortable, by means of subterranean stoves or ovens, of which we copied a description two or three weeks since. The Captain of Company E, an old California campaigner, and a very worthy patriot and patient of ours, had introduced them in all the tents of his command, and their operation was most satisfactory. It seems the arrangement is not new with the Army of the Potomac, but has been long in use in California among the miners, where it is known as the "California stove." We found the heat generated by this simple contrivance to be of the most genial character. The dampness of the soil undoubtedly tempered it, so that it was remarkably soft and agreeable. We can hardly say too much in favor of this invention, which may be the means of saving many valuable lives. For drying the wet shoes and clothing of the men, or for making tea, it answers an admirable purpose. By it the temperature can be raised to any desired point, and the men can be made as comfortable in the field as in barracks; at the same time the most thorough ventilation is secured by means of oval openings at the top of the tents, through which a current must constantly set by means of the hot air below. A military officer of high rank made an objection to them, that he thought they would make the men tender and more susceptible to the inclemency of the outside weather. But in this he certainly is mistaken. The idea has long been exploded, that in order to toughen men you must try their powers of vitality to the utmost. It is true that the survivors of such a process are likely to be tough, but it is only because their capacity of endurance was enough to carry them through the trial which was fatal to the weaker subjects, who might have been saved by a less severe ordeal. The point is to make the men more comfortable in their tents; if this can be gained by this simple and cheap method, blankets are of comparatively little consequence. We noticed that a thorough draught was secured for the exit flue of the California stove by the simple device of placing two headless barrels one above the other, over the outer opening, and banking up the lower one with earth, so as to form an excellent chimney. We observed, also, that at the outer extremity of the air flue a hole was sunk to a sufficient depth below it, so that no rain could possibly get access to the fire. In conclusion, we would gratefully acknowledge the courtesy of all the officers with whom we came in contact, both military and medical. We feel as-

sured that the 23d will compare favorably with any regiment which the State has yet raised.

PRIVATE MILITARY HOSPITAL.—In the papers of the Sanitary Commission, which we have already noticed, flattering mention is made of a private military hospital recently established in Cincinnati by Dr. William H. Mussey, of that city. In order to carry out his benevolent design, Dr. M. succeeded in obtaining permission from the United States government to occupy the Marine Hospital, a costly edifice, admirably adapted for the plan proposed, and its spacious wards were soon filled with accommodations for the sick. So early as June, according to the report of the Commissioner, nearly fifty sick soldiers had been thrown upon his hospitality. As this is the only military hospital in Cincinnati, much praise is due this distinguished surgeon for his zeal and energy in so effectively executing his humane purpose and lending his valuable professional services to the work. Dr. Mussey has recently been appointed Brigade Surgeon, with the charge of the Military Hospital, and possessing, as he does, talents of a high order and the prestige of a name that will ever adorn the annals of surgery, he cannot fail to gain fresh laurels in the new field upon which he has entered.

VERMONT MEDICAL SOCIETY.—This Society held its annual meeting in the State House, on the 16th and 17th ult. In absence of the President, the meeting was called to order by the Secretary, Dr. McCollom, of Woodstock, and Dr. Stiles, of Windsor, was appointed President *pro tem.* The record of the semi-annual meeting having been read and approved, and a committee appointed to examine candidates for membership, the following gentlemen were elected members:—Drs. Charles S. Downs, Topsham; E. F. Upham, West Randolph; M. J. Hyde, Isle La Motte; C. F. Hawley, Fairfax; J. E. Macomber, Worcester; E. S. Blanchard, Hyde Park; G. W. Hunt, New Haven.

The officers elected for the ensuing year were:—A. T. Woodward, Brandon, *President*; H. S. Brown, St. Johnsbury, *Vice President*; Wm. McCollom, Woodstock, *Recording Secretary*; C. B. Chandler, Montpelier, *Corresponding Secretary*; Charles Clark, Montpelier, *Treasurer*; H. F. Stevens, St. Albans, Joseph Perkins, Castleton, J. N. Stiles, Windsor, *Committee on Printing*; J. N. Stiles, Joseph Perkins, E. Hazen, *Business Committee*; J. N. Stiles, H. S. Brown, *Delegates to Castleton Medical College*; M. Love, Bennington, W. H. H. Richardson, Montpelier, *Delegates to Burlington Medical College*.

Drs. Morgan of Pownal, Chandler of St. Albans, and Richardson of Montpelier, were constituted a Committee to confer with the Executive in reference to the appointment of a Medical Board for the examination of candidates for the office of surgeon in volunteer regiments.

Instruments of new construction were exhibited by Dr. Bradford, of Northfield; also by Dr. Branch, of St. Albans.

Dr. Keith presented a paper on Retention of the Placenta, which elicited much interesting discussion from Drs. Stevens, Woodward, Stiles, Bradford and others.

Dr. Brush read a paper upon Diphtheria, and cases were reported by many of the members. Four or five hours were devoted to the discussion of this disease. Drs. Woodward, Marsh, Keith, Hazen, McCollom, Bradford, and others, participated. Drs. Woodward and

Bradford strongly advocated the use of calomel in this disease, which doctrine was strenuously opposed by nearly every member present.

A Committee was appointed to investigate and report upon this subject at the next semi-annual meeting.

This meeting was one of unusual interest, the attendance greater than has been known for years, and a spirit of investigation exhibited and zeal awakened that will accompany members to their respective fields of practice, and result in much good to the communities upon which are bestowed the labors of this self-denying class of men.

The semi-annual meeting will be held in St. Albans, on Wednesday and Thursday following the commencement of the Medical Colleges, in June next.

NEW YORK OPHTHALMIC SCHOOL AND HOSPITAL—The Introductory to the tenth course of lectures on Ophthalmic Medicine and Surgery was delivered by Dr. Mark Stephenson, on the 26th of October, at the Hospital, No. 63 Third Avenue, to a large and attentive class of medical pupils and professional gentlemen. The Institution is in a flourishing condition, its beneficiaries now number over *nine thousand*; it is open to the poor from all parts of the United States, every Tuesday, Thursday and Saturday, and clinical instruction is given to students from $1\frac{1}{2}$ to $2\frac{1}{2}$ P. M., on each of the above-named days. The attending surgeons are Drs. M. and M. P. Stephenson, and Dr. J. P. Garrish. Professional gentlemen visiting the city, are invited to visit the Institution, where every attention will be shown them by its attending surgeons.

HEAVY DAMAGES IN A SUIT FOR MAL-PRACTICE.—A case has been lately tried in Chicago, in which an oculist and aurist of that city—Dr. F. A. Caldwell—was, by a verdict of the jury, assessed in damages to the amount of \$10,000. A scar of the left eye, caused, it is said, by the smallpox, was the imperfection which the plaintiff, a female domestic in a hotel, wished removed. The defendant promised to do this in a short time without pain, and with no injury to the right eye. He was paid \$30 in advance. It was alleged that he improperly cut and punctured the left eye, afterwards neglecting to visit her, and causing her to be exposed at his office so that she took cold, the eye became inflamed, and was lost; and that certain inflammatory drops were applied to the right eye, whereby its sight was destroyed. The plaintiff alleged, on his part, that the disease was *staphyloma*; that he intended to reduce the size of the eye so as to insert a glass over it, and did not undertake to restore it to its original condition; and that his failure of success was owing to the patient's own neglect, rather than to his ignorance, mal-practice or neglect. The *Chicago Medical Examiner*, from which we gather the above facts, states that a motion has been made for a new trial.

APPOINTMENTS.—Dr. Alfred Hitchcock, of Fitchburg, has received the appointment of Brigade Surgeon from the President.

Dr. W. M. Lane, of Charlestown, has received and accepted an appointment as surgeon in the Navy, and has joined the blockading fleet.

MEDICAL MISCELLANY.—Dr. Steiner, Professor of Chemistry in the Maryland College of Pharmacy, having removed his residence to Frederick City, has resigned his connection with the College, and Mr. Alfred M. Mayer has been elected to the vacant chair. The lectures will be conducted as heretofore at the College Hall, North Calvert Street, Baltimore.

The Surgeon of one of the Iowa regiments, in Missouri, complains, in the *New York Medical Times*, of the want of suitable ovens in the army for baking bread when on a march. Nothing but the little camp pans is in use, he says, with them,

and the bread baked therein has proved wholly unfit for use. He also complains of the scanty supply of fresh meat and vegetables, in consequence of which the scurvy has already made its appearance among the troops.

At a meeting of the Buffalo Medical and Surgical Association, Professor Rochester reported 137 cases of re-vaccination. More than half the individuals, he stated, were found susceptible of the disease.

Prof. Stephen Smith, of Bellevue Hospital Medical College, New York, is preparing a work on Medical Jurisprudence in its application to the Practice of Medicine, Surgery and Midwifery in the United States, and solicits information from members of the profession in regard to trials for alleged mal-practice, including the notes and charge of the presiding judge in such suits, or the notes of the legal gentlemen engaged.

The Introductory Lectures at the opening of the New York Medical Schools were delivered as follows:—At the College of Physicians and Surgeons, by Prof. T. M. Markoe; at the University Medical College, by Prof. John T. Metcalfe; at the New York Medical College and Charity Hospital, by Prof. C. A. Budd; at the College of Pharmacy, by Prof. Maisch. The proceedings at the opening of the Bellevue Hospital College were noticed last week.

The winter term of lectures in the Medical Department of Lind University, Chicago, commenced on the 14th of October, by an Introductory Lecture from Prof. E. Andrews.

The Rush Medical College, in Chicago, commenced its winter term of lectures on the 16th of October.

The Hartford (Conn.) Hospital, under the care of Dr. Hawley, has gone into operation, although only about one quarter of the building originally planned is yet constructed. There are now 19 males and 11 females under treatment. Eight of the males were soldiers in the Connecticut regiments. Fifty can be accommodated in the building. Funds are needed, as we learn by a Hartford paper, for the completion of the building, and it is hoped that the wealthy men of that city will not long allow this to be said.

The ladies who compose the Board of Managers of the Cincinnati Orphan Asylum have elected a homœopathist to the medical department.

VITAL STATISTICS OF BOSTON.

FOR THE WEEK ENDING SATURDAY, NOVEMBER 2d, 1861

DEATHS

	<i>Males.</i>	<i>Females</i>	<i>Total</i>
Deaths during the week,	33	32	65
Average Mortality of the corresponding weeks of the ten years, 1851-1861,	34.1	33.7	67.8
Average corrected to increased population,	75.6
Deaths of persons above 90,

Mortality from Prevailing Diseases

Phthisis.	Chol. Inf.	Croup.	Sear. Fev.	Pneumonia.	Variola.	Dysentery.	Typ. Fev.	Diphtheria
14	1	1	2	2	0	1	0	1

COMMUNICATIONS RECEIVED.—Secretion and Uses of the Bile

MARRIED.—At Bristol, R. I., 23d ult., Dr. Augustus P. Clarke, Assistant Surgeon in the Harris Brigade Cavalry, U. S., to Miss Mary H. Gray, of B.—At Hamilton, Ill., W. M. Cox, M.D., of Savannah, Iowa, to Eleanor M., daughter of Dr. Charles Choate.—In Worcester, Oct. 15th, Dr. Wm. H. Draper, of Philadelphia, to Miss Elizabeth Waldo Kinnicutt, of the former place.

DIED.—At Shrewsbury, 24th ult., Dr. Amos Parker, of Bolton, 84.—In Lancaster, Pa., Dr. John Miller, in the 69th year of his age.

DEATHS IN BOSTON for the week ending Saturday noon, November 24, 65. Males, 33—Females, 22—
Accident, 2—asthma, 1—disease of the brain, 1—inflammation of the brain, 1—bronchitis, 3—burns, 1—
cancer, 1—cholera infantum, 1—cholera morbus, 1—consumption, 14—convulsions, 3—croup, 1—cyanosis,
1—diarrhea, 3—diphtheria, 1—dropsy, 1—dropsy of the brain, 3—dysentery, 1—scarlet fever, 2—
disease of the heart, 2—infantile disease, 4—intemperance, 2—disease of the kidneys, 1—
inflammation of the lungs, 2—malaria, 2—old age, 1—pneumonia, 1—puerperal, 1—
smallpox, 1—tuberculosis, 1—varicose veins, 1—

Under 5 years of age, 29—between 5 and 20 years, 4—between 20 and 40 years, 14—between 40 and 60 years, 7—above 60 years 10. Born in the United States 42, Ireland 14, other places 8.